

PTO/SB/82 (04-05)

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**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	09/778,108
Filing Date	February 07, 2001
First Named Inventor	Aaron DeMello
Art Unit	2141
Examiner Name	Quang N. Nguyen
Attorney Docket Number	

I hereby revoke all previous powers of attorney given in the above-identified application.

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☐ I hereby appoint the practitioners associated with the Customer Number:

☒ Please change the correspondence address for the above-identified application to:

☐ The address associated with
Customer Number:

OR

☒ Firm or
Individual Name

Address 152 Notre Dame East #300

City Montreal

State Quebec

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Country Canada

Telephone 514 8155017

Email aaron@profilium.com

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature



Name Alexander Miller

Date 08/19/2005

Telephone 514 8155017

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 4 forms are submitted.

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
<input checked="" type="checkbox"/> Firm or Individual Name					
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Country	Canada				
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Name	Aaron DeMello				
Date	08/19/2005	Telephone	514 8155017		

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**Signature *Gerald Host*

Name Gerald Host

Date 08/19/2005

Telephone 514 8155017

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This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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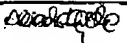
<input checked="" type="checkbox"/> Firm or Individual Name					
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SIGNATURE of Applicant or Assignee of Record

Signature			
Name	Alexandre Legendre		
Date	08/19/2005	Telephone	514 8155017

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